

OCT 11 2007

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07/13/2007

AGERE SYSTEMS INC.

~~XXXXXXXXXXXX~~ 400 Connell Drive  
~~XXXXXXXXXXXX~~ Berkeley Heights, NJ 07922  
~~XXXXXXXXXXXX~~

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I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.

Patricia M. Lott

(Depositor's name)

*Patricia M. Lott*

(Signature)

October 11, 2007

(Date)

10/11/2007 FMETEK12 00000136 501735 09497993

01 1501 1440.00 DA

APPLICATION NO.	FILED DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/497,993	02/04/2000	Bradley Paul Barber	AGERE3.0-064	8152

TITLE OF INVENTION: METHOD OF ISOLATION FOR ACOUSTIC RESONATOR DEVICE

APPLN TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$0	\$0	\$1400	10/15/2007

EXAMINER	ART UNIT	CLASS-SUBCLASS
TUGBANG, ANTHONY D	3729	029-025350

Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.

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2. For printing on the patent front page, list

(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,

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ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

AGERE SYSTEMS INC.

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

ALLENTOWN, PA

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are submitted:

☒ Issue Fee☐ Publication Fee (No small entity discount permitted)☒ Advance Order - # of Copies 1

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☐ A check is enclosed.☐ Payment by credit card. Form PTO-2038 is attached.☒ The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 50-1735 (enclose an extra copy of this form).

Change in Entity Status (from status indicated above)

☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant, a registered attorney or agent, or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

Authorized Signature *Patricia M. Lott*

Date Oct. 11, 2007

Typed or printed name Patricia M. Lott

Registration No.

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